Centers for Disease Control and Prevention Executive Summary of Remarks Elder Justice Coordinating Council Meeting Research - Opportunities to Advance the Field April 27, 2016

Overview

For more than 20 years, the Centers for Disease Control and Prevention (CDC) has been the nation's leading public health authority on violence prevention. CDC is committed to stopping violence before it begins. Our mission is to prevent violence and its consequences so that all people, families, and communities are safe, healthy and free of violence.

CDC leads a unique approach to prevention focused on preventing violence throughout the lifespan – from early childhood into older adulthood - and before it occurs - with a focus on individuals, families, communities and society as a whole. CDC defines and monitors the problem through data collection and analysis; conducts research to understand risk and protective factors; develops new prevention strategies and assures widespread adoption of effective strategies.

CDC recently released a five-year vision, *Preventing Multiple Forms of Violence: A Strategic Vision for Connecting the Dots*, which outlines its areas of strategic focus to help us understand, respond to, and ultimately prevent violence across the lifespan, including in older adulthood. The centerpiece of this vision is that the different forms of violence—child abuse and neglect, youth violence, intimate partner violence, sexual violence, elder abuse and suicidal behavior—are interconnected and often share the same root causes. Understanding the overlapping causes of violence and the things that can protect people and communities can help us better prevent violence in all its forms.

A key element of CDC's interconnected approach to violence prevention is to strengthen public health surveillance and research. Our ability to demonstrate impact and evaluate progress in preventing multiple forms of violence rests on having solid, high-quality data at the local, state and federal level. It also rests on being on the cutting edge with our science so that individuals, communities, and states have timely information, useful tools and resources, and effective solutions.

CDC's most recent contribution to strengthening public health surveillance and research in the area of elder abuse is its *Elder Abuse Surveillance: Uniform Definitions and Recommended Core Data Elements* publication, released in early 2016. This set of uniform definitions and recommended core data elements may move the field focused on elder abuse closer to obtaining robust, accurate and reliable epidemiologic estimates. They may also provide a stronger basis for evaluating the effectiveness of population level strategies for prevention and intervention and for setting prevention priorities and objectives.

Building on this work, CDC will soon release *Elder Abuse Surveillance: Supplementary Data Elements,* which will provide practitioners and researchers with more extensive opportunities for expanded surveillance, studies of modifiable risk and protective factors, and research to inform practice.

More information on each of these recent publications is below.

Preventing Multiple Forms of Violence: A Strategic Vision for Connecting the Dots (http://www.cdc.gov/violenceprevention/pdf/strategic vision.pdf)

- The different forms of violence—child abuse and neglect, youth violence, intimate partner violence, sexual violence, elder abuse and suicidal behavior—are interconnected and often share the same root causes. Understanding the overlapping causes of violence and the things that can protect people and communities can help us better prevent violence in all its forms.
- CDC's *Preventing Multiple Forms of Violence: A Strategic Vision for Connecting the Dots* describes the Division of Violence Prevention's 5-year vision and areas of strategic focus to help us understand, respond to, and ultimately prevent violence across the lifespan.
- CDC uses a cross-cutting approach because several decades of research, prevention, and services have revealed a lot about the different forms of violence and how to prevent and respond to them. One fact clearly emerging from this body of work is that the different forms of violence are strongly interconnected. Previous research indicates:
 - o Victims of one form of violence are likely to experience other forms of violence.
 - People who have been violent in one context (e.g., toward peers) are likely to be violent in another context (e.g., toward dating partners).
 - The different forms of violence share common consequences that have health effects across
 the lifespan such as mental, emotional, physical or social problems. These consequences
 may contribute to chronic health problems such as cancer, cardiovascular disease, lung
 disease, or diabetes.
 - o Different forms of violence share common risk and protective factors.
- To impact multiple forms of violence, prevention efforts should start early and continue across the lifespan. They should be designed to use resources efficiently and effectively and in ways that result in substantial reductions in violence. Toward this end, CDC will strategically focus its attention on four areas: 1) the developmental periods of childhood and adolescence, where we are likely to achieve the greatest long-term impact, 2) the populations and communities that disproportionately bear the burden of violence, 3) the shared risk and protective factors that are most likely to influence multiple forms of violence, and 4) by giving priority to the programs, practices, and policies that are most likely to impact multiple forms of violence.
- There are three elements that are central to this vision: 1) fostering collaboration and exchange to maximize impact; 2) using effective communications and dissemination strategies; and 3) strengthening public health surveillance and research.
- Our ability to demonstrate impact and evaluate progress in preventing multiple forms of violence rests on having solid, high-quality data at the local, state and federal level. It also rests on being on the cutting edge with our science so that individuals, communities, and states have timely information, useful tools and resources, and effective solutions.
- To strengthen public health surveillance and research, CDC will focus on strengthening data systems to monitor the burden, identify changing patterns of violence, and to evaluate cross-cutting impacts; and generating new knowledge.

Elder Abuse Surveillance: Uniform Definitions and Recommended Core Data Elements (http://www.cdc.gov/violenceprevention/pdf/ea book revised 2016.pdf)

- CDC's most recent contribution to strengthening public health surveillance and research in the area of elder abuse is its *Elder Abuse Surveillance: Uniform Definitions and Recommended Core Data Elements* publication, released in early 2016.
- We know that elder abuse can be prevented or halted. However, preventing elder abuse at the population level requires data that will support effective action. Such data enable the effectiveness of prevention and intervention strategies to be assessed and facilitate decisions regarding

- strategies that should be implemented or further evaluated. The data also inform decisions on how resources should be allocated to achieve elder abuse prevention and intervention objectives.
- Numerous organizations and agencies collect elder abuse-related data that could be used for the
 previously stated purposes. Unfortunately, these data have often been collected for elder abuse
 cases using different case definitions. Moreover, the frequently used data collection instruments,
 protocols, and systems tend to capture information on persons and incidents that is too often
 incompatible. Such inconsistencies reflect variations in the legislation, statutes or regulations that
 provide the criteria used to identify cases, or variations in the goals, philosophies, or scope of
 specific studies.
- These divergences have made it difficult to determine the magnitude of elder abuse nationally, to compare the problems across states, counties, and cities, and to establish trends and patterns in the occurrence and experience of elder abuse.
- Given these conditions and consequences, the creation of uniform definitions and data elements for
 use in collecting elder abuse data was essential. Use of uniform definitions and data elements may
 move the field focused on elder abuse closer to obtaining robust, accurate and reliable
 epidemiologic estimates. They may also provide a stronger basis for evaluating the effectiveness of
 population level strategies for prevention and intervention and for setting prevention priorities and
 objectives.
- Proposed uniform definitions were developed for the following phenomena (and for associated terms or elements that could be sources of confusion or disagreement).
 - o Elder Abuse
 - Involved Parties
 - Physical Abuse
 - Sexual Abuse
 - o Emotional/Psychological Abuse
 - Neglect
 - o Financial Abuse/Exploitation
 - o Other Related Phenomena
 - o Elder Abuse Circumstances or Consequences (associated concepts)
- The development and use of uniform definitions and recommended core data elements is an important first step in a larger process addressing data collection features that cause important discrepancies, gaps, and limitations in what is known about elder abuse.
- This initial release of *Elder Abuse Surveillance: Uniform Definitions and Recommended Core Data Elements, Version 1.0* is intended to serve as a starting point. Many definitions, data element descriptions, and coding specifications are new, and field testing is necessary to evaluate them. Systematic field studies are needed to gauge the usefulness of the content of Version 1.0, identify optimal models, methods, and processes of data collection, and specify resource requirements for implementation.

Coming Soon: Elder Abuse Surveillance: Supplementary Data Elements

- CDC will soon release supplementary data elements that were developed as part of its elder abuse definition work.
- Elder Abuse Surveillance: Supplementary Data Elements is a companion publication to Elder Abuse Surveillance: Uniform Definitions and Recommended Core Data Elements.
- It will enhance and further extend information provided by the first publication, including guidance regarding additional administrative, clinical, or survey data that would be beneficial to collect if resources allow.
- Such data could provide practitioners and researchers with more extensive opportunities for expanded surveillance, studies of modifiable risk and protective factors, and research to inform practice.